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ABSTRACT

The task of dissolving infantile dependency ties to the mother and family during adolescence has been frequently cited as a major developmental task of adolescence. The role of the mother in the resolution of the rapprochement crisis as it continues into adolescence was illustrated through a case analysis of a 14-year-old boy and his mother. The symptoms of the adolescent included anxiety, poor school performance, and drug abuse. The mother sought treatment for intense anxiety and overwhelming dread when contemplating her future and that of her son. The child's crisis and his mother's were connected and occurred sequentially. His anxiety revived her earlier unresolved feelings of abandonment, and she was unable to support his individuation. He turned to drugs as a substitute for his mother as well as for protection against his yearnings for her and her intrusion. The process of reworking separation and individuation in adolesence must be understood in the context of the parent child relationship. (JAC)

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THE IMPACT OF MATERNAL PERSONALITY ON INDIVIDUATION DURING ADOLESCENCE

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Abstract:

TITLE: The impact of maternal personality on individuation during adolescence.

The role of the mother in the resolution of the rapprochement crisis as it continues into adolescence is examined through the analyses of a 14 year old boy and his mother. The symptoms of the adolescent were anxiety, poor school performance, and drug abuse. The mother sought treatment for intense anxiety, and overwhelming dread when contemplating her future and that of her son. The dynamics of the mother, the nature of the symbiotic bond, and their impact on the inability of the adolescent to effectively disengage from anaclitic parental ties are discussed. The importance of understanding parental dynamics in the analysis of adolescents is stressed from theoretical and clinical viewpoints.

This paper will examine how anaclitic conflicts in an adolescent boy were affected by the history and personality of the boy's mother and his relationship with her.

The task of dissolving infantile dependency ties to the mother and family during adolescence has been frequently cited as being a major developmental task of adolescence (Freud, 1905; Jacobson, 1964; Brandt, 1978). It is our belief that the extent to which this is accomplished is dependent not only on the nature of the infant-parent relationship, but also on the nature of the existing parental relationships in adolescence. A number of authors have suggested that this may be true. For example, in a recent meeting Neubaur (1982) raised the issue of the importance of looking at the influence of the family at succeeding developmental stages. Mahler (1968) suggested that the developmental crisis of adolescence can play an important role in the final resolution of the rapprochement crisis of early childhood. She postulated three variables which she felt were of particular importance in promoting individuation: the mother's personality structure; the development of her parental function; and her conscious and unconscious fantasies regarding the child. It is quite likely that these maternal variables would also have an impact on the adolescent's struggle for individuation.

Anthony (1969) suggested that adults typically stereotype adolescents based on their own incompletely repressed impulses and conflicts. He noted that some parents may respond to their

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adolescent children as endangered or lost objects. Thus, some parents may manifest an overconcern for their child's safety and attempt to protect them from exposure to the dangers of the adult world, while others may not be able to accept the loss of the dependent child and so prevent the child from developing his own autonomy and independence. It seems clear that such parental attitudes can exacerbate conflicts regarding separation and breaking of infantile ties in the adolescent.

Relatively little clinical material has been reported regarding the role of the parent in either facilitating or inhibiting the individuation of the adolescent. This paper will address itself to the role of the mother in the resolution of the rapprochement crisis during adolescence. We will examine the nature of the symbiotic bonding within this relationship and the difficulties generated in adolescence by the failure to establish more developmentally appropriate bonds.

Case Histories

Mark C.

Mark was brought to treatment at age 12 when his parents became concerned about his general anxiety, nightmares, and poor school work. He is the younger of two siblings, having a sister 3½ years older. The family is upper middle class, with both parents working full-time. Mark attended private schools, and had a moderate learning disability which required tutoring in the primary grades. His IQ scores were somewhat above normal. He also had a congenital total hearing loss in his left ear.

Mark was a dark, thin, shy boy who appeared anxious. He spoke of his strong attachment to his mother. He was more attached to her than his father because he felt that she understood him and was sympathetic. He could talk to her and tell her his problems, his dreams, etc.

One of the first dreams presented in therapy was that of his parents being killed in a "Towering Inferno" (from the movie of the same name). He felt lost and scared without them. During the initial phase of treatment, there was considerable discussion of Mark's dreams. Their primary theme was destruction or harm coming to his parents. Mark felt these dreams were generated by horror movies, and talked alot about scary movies on T.V. Other than this there appeared to be little going on in his life, he never talked of friends, and continued to maintain a close relationship with his mother.

In the next phase of treatment there was an increase in the number of dreams relating to his father. In these dreams father was seen as someone who harmed him in some way, for instance, the father was a member of a gang of spies who "accidentally" shot Mark.

He also began to denigrate his father and express more anger at him. He said his father was a fool and only interested in his own well being. He reported fantasies of beating up his father when he got older, for example, by picking up the dining room table and throwing it at him.

During this time Mark's relationship with his mother also changed. While at first its 'goodness' seemed preserved he

began to experience her as increasingly intrusive, and felt he wanted to be left more on his own.

It was at this point that Mark also began to experiment with drugs. He was worried about being caught. While these concerns had a paranoid flavor to them they also expressed his ambivalence about separating from his parents. On one occasion he stated that he felt the police would follow and arrest him because they knew he had marijuana and bring him home to his parents.

Mark became more aware of the distance between himself and his mother. He was distressed and saddened that his mother was unable to help him with problems he was having with his homework, and felt very much alone. His use of drugs increased with his feelings of psychological separation from his mother. Eventually his use of marijuana became continuous.

Mark's thoughts about his use of drugs focused not only on his attempt to alleviate the anxiety of being on his own but also on his attempts to separate from his mother. With regard to the former, he reported "Marijuana is like a security blanket. It keeps anxiety away, better than my mother." But on another occasion he said, "when I smoke, I'm in control, it's my world. . . . It's my head, my space, no one can enter, my mother can't come in."

Mrs. C.

Mrs. C. sought treatment for depression, feelings of intense anxiety, and an immobilizing experience of dread when she contemplated the future of either herself or that of her

children. She described her problems as beginning when her relationship with her son began to break down during his early adolescence.

She was a small soft spoken but intense woman who constantly wrung her hands during the interviews. In her deliberate and well chosen words there were still traces of her native language although she had been in this country for over thirty years.

Born into a middle class family, she was the next to youngest of six children. Her youngest brother was born when she was two years old, and a year later her mother died of cancer. Since the father was unable to care for all the children, Mrs. C. was sent to live with an aunt's family along with her younger and next older brother. Her early life is remembered as lonely and punitive. The father visited infrequently and died when she was eight. She felt abandoned by him and claimed to have absolutely no memories of him. The only memories of her mother are seeing her in the hospital and visiting her grave.

As a child she was jealous of her cousins and other children who had intact families. She felt her life would have been free from pain if she too had had a mother. She turned to religion, believing that God would help her. God came to represent the parents she never had, particularly the father who would return someday and rescue her.

Mrs. C. came to this country when she was in her early twenties. She began working for a business whose family members

became a substitute family for her. She continued to work for them until the present.

Mrs. C. married in her late 30's. Totally dependent on her husband, she felt she could not exist without him. Her children were a great source of happiness to her. In a language that typifies a symbiotic picture she stated, "Their infancy was the happiest time of my life. . . . I felt whole. . . . I felt completed." Nonetheless it was not a time without conflict. Mark was a difficult child. He was born by Caesarian section some weeks prematurely, at the doctor's recommendation. From the beginning she was afraid he was damaged and that she was to blame, e.g. she shouldn't have smoked or drank during pregnancy, she should have had more courage and fought the doctor who wanted to do an early Caesarian, etc. These guilty feelings would diminish at times but would resurge when there was any difficulty with her son and continued throughout his development.

She was afraid that Mark couldn't do things for himself. He had a low frustration tolerance, cried alot as an infant, and as a child would have temper tantrums. She felt she did not have the will to discipline him or to set limits and that he would always win. In response she would submerge her rage and anger and give in to him with a feeling of helplessness. Nonetheless she also described a time when she became so angry and frustrated that she lost control and began shaking him. Her unwillingness to set limits had its roots in her fear of hurting or damaging him. The discovery of deafness in one

ear and his early difficulty in reading added to the idea that he was damaged.

Issues of Separation and Symbiosis

It is noteworthy that Mark's crisis and his mother's were connected, and occurred sequentially. His normal developmental problems regarding the loss of infantile object ties revived unresolved issues for the mother, and precipitated her crisis which she described as being as close to a breakdown as she had ever experienced. His anxiety appeared to mirror his mother's: each was afraid of leaving the other. It seems that Mark's crisis revived earlier unresolved feelings in Mrs. C., particularly those of abandonment and ensuing fantasies that her father did not return to re-unite the family because of his preference for another woman. It may be that Mark's adolescent sexual stirrings aroused the unconscious fantasy of his leaving her for another woman.

Mark's treatment began with a nightmare about the loss of his parents in an inferno of flames, defining the themes of treatment as those of fears of separation and fears that his own sexuality and anger would be instrumental in that loss. While the treatment facilitated Mark's separation from his mother, this separation in itself was frightening to Mark and also threatening to the mother.

As Mark attempted to separate and individuate, Mrs. C. became frightened and communicated to him that separation and moving away is dangerous. He incorporated her fears and became even more frightened. The mother was unable to offer support

for his individuation, as a result of the imprint of her own history and her catastrophic loss of a family in her own childhood. Her fears for Mark resulted from a merged identification with him, a re-experiencing of her own early loss, and the threat of dissolving symbiotic connections that Mark's dawning adolescence brought with it.

Because of a re-emergence of oedipal issues, Mark found it impossible to go back to an earlier symbiotic and dependent relationship; he experienced his growth as a loss. At that point he turned to drugs, particularly marijuana, which were a substitute for his mother, as well as protection against his yearnings for her and her intrusion. However, what began as an experiment, unfortunately ended as a destructive and dead-end situation, with emotional dependence and passivity transferred from his mother onto drugs.

Mrs. C.'s normal parental protectiveness was distorted by her own traumatic history. Her identification with her son as the damaged and helpless child, enabled her to relive and rewrite her own past and be the mother to Mark she never had. She wanted to protect both children from 'fate' and 'catastrophe' as she had wished to be protected. "I could never trust life" was a recurring statement she made about her present and her past. She wanted to spare him pain because "he would find the pain unbearable." At the same time, she saw the need and desirability of separation, and that what had been painful for her might not be so to someone else, even her own child. Yet, emotionally for her and later for Mark

the developmental task of separation was insurmountable. Mark not only had to separate himself from his mother's over-protectiveness and intrusiveness in the real world, but also had to disengage himself from her conscious and unconscious fantasies about her past life, and her fears of its repetition.

Discussion

If we accept the importance of the reworking of separation-individuation during adolescence then it follows that this process would have to be understood in the context of the parent-child relationship.

Mahler (1968) has pointed out that in instances of severe difficulties in the separation individuation process it was the "mother's omnipresence that created an unendurable intrusion upon and interference with the budding ego . . . [which] made the process of individuation in the separation individuation period one which was beset by abysmal panic" (p. 159). She further states that the most extreme separation reactions occur in children in which the symbiotic relationship was too exclusive or in which the mother could not accept the child's individuation and separation.

It is our impression that this is as true during adolescence as it is during early childhood. For instance, Jacobson (1964) notes that the deeper and more powerful the imprint of the mother's attitudes, the more they will arrest and interfere with the child's autonomous development.

The importance of understanding family dynamics has been alluded to by a number of other workers. For example, Freud

(1909) suggested that the individual's personality was often a reflection of the family psyche. More recently, Smirnoff (1971) states that the whole family plays a role in a "family neurosis" which becomes part of the neurosis of the child. Finally, Anthony (1980) in a recent article points out that while psychoanalysts are oriented toward the individual, greater importance should be placed on the extrapsychic world, particularly the family, and suggests that "the construction of a dynamic family model could serve as a useful frame of reference during the treatment of the child."

In the cases presented, we have attempted to demonstrate how issues in the mother's personality, specifically her own anxieties about the world, based on her past, affected those of her adolescent son. It is our hope that in the future greater attention may be paid to the role parents play in the course of adolescent development and analysis.

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